# GUIDELINES FOR FOSTER PARENTS AND RELATIVE CAREGIVERS FOR HEALTH CARE AND BEHAVIORAL/MENTAL HEALTH SERVICES

When a child first enters foster care, the caregivers (whether licensed foster parents or relatives) receive numerous pieces of information from various sources. At times, it may feel a bit overwhelming. The guidelines provided here will serve as quick reminder of:



- Required health care needs for foster children.
- · Behavioral or mental health services.
- Caregiver tips for scheduling and facilitating appointments.

#### **Keep in Mind**

It is important that birth parents be included in doctor appointments. Ask your caseworker to provide guidelines for the child in your care.

#### **Health Requirements for Foster Children Behavioral/Mental Health Services** All Children At times, children in foster care may benefit from • Entering foster care must have an initial professional counseling services/therapy. The starting point for behavioral or mental health services comprehensive medical examination within 30 is the child's Medicaid Health Plan. When calling to days from the date the child first came into foster care (regardless of the date of his/her last schedule an appointment for mental health/behavioral health services, make note of the following: medical exam). This comprehensive medical exam is also known as an Early, Periodic Identify yourself as the foster parent to the child Screening, Diagnostic, Testing (EPSDT) or (regardless if you are related to the child). Well-Child Exam. • Be specific about your concerns with the child (issues with behavior, mood, sleep patterns, Ages 3 through 20 years require yearly medical exams (EPSDT or Well-Child Exam). nightmares, bed wetting etc.). • Under 3 years of age require more frequent Provide information about the medications the child is currently taking, including dosage. medical exams. • Be specific about the reason for the appointment Ages 3 and older require a dental examination within 90 days of entering foster care unless the (assessment for services, counseling child had a dental exam within 6 months prior to appointment.) • Ensure that you have the child's insurance card the date. and Medicaid identification number available. Foster parent or relative caregiver responsibility: Additional Information regarding • Arrange for the medical and dental appointments behavioral/mental health appointments: • Birth parents should be involved in all mental within the noted timeframes. health appointments. Inform the doctor/dentist office that the child is in • Contact the foster care worker regarding any/all foster care when making the appointment. • Provide your foster care worker with the appointment dates and times or if you have any problems in scheduling the appointment. appointment date for the child's records. • Foster parents and relative caregivers cannot • Contact the foster care worker immediately if there provide consent for psychotropic medications. is an issue in scheduling or keeping the

#### When going to a medical or therapy appointment, make sure to bring:

Child's medications.

appointment.

- Child's insurance cards (Medicaid card and Medicaid Health Plan Member card).
- DHS-3762 Consent to Routine, Non-Surgical Medical Care and Emergency Medical/Surgical Treatment card.
- Well Child/EPSDT form, needed for the initial, periodic or yearly medical exams.



#### Items Required for Foster Parent/Relative Caregiver

In order to access health care for the foster child the following items are needed and are to be provided by the foster care worker:

- Date child entered foster care, which may or may not be the date the child was placed in your home.
- Name of the child's Medicaid Health Plan (Medicaid's managed health care program.)
- Name and phone number of the child's primary care physician, provided the child has a family doctor.
  If not, the child must obtain the medical examination through a physician within his/her specific
  Medicaid Health Plan.
- DHS-3762, Consent to Routine, Non-Surgical Medical Care and Emergency Medical/Surgical Treatment card.
- Mihealth card (Medicaid card) and MHP member ID card, if available. If not, the worker will provide the child's Medicaid recipient ID number.
- **Well Child Exam/EPSDT** form. If the foster parent or relative caregiver is not able to provide responses to the 'parent' statements found on page 2, Developmental Surveillance, the foster care worker should provide the birth parent's responses prior to the child's medical exam appointment.

### Contact your foster care worker if you are missing any of the above items.

#### Information for Behavioral/Mental Health Services

- Mental health care can be for an assessment, counseling and/or medications.
- Mental health medications or psychotropic medications can be recommended and prescribed by psychiatrists and by primary care physicians.
- Foster parents and relative caregivers can consent for counseling but **not** for mental health medication.
- **Temporary court ward:** If the foster child is on medication or, if medication is considered during mental health care, a birth parent **must** be involved to provide consent.
- **State ward**: If the foster child is on medication or, if medication is considered during mental health care, the supervising agency **must** be involved to provide consent.
- **Permanent court ward**: If the foster child is on medication or, if medication is considered during mental health care, the court **must** be involved to provide consent.

#### Examples of a phone call to schedule the foster child's appointment including the needed information:



Foster Parent/Relative Caregiver: "Hello, I would like to make an appointment for a physical exam for my foster child, <u>(supply child's name)</u>. He/she came into foster care on (<u>give date child entered foster care</u>) and needs a full well child physical exam before (<u>30 days from the date child entered foster care</u>). His/her Medicaid coverage is through (<u>name of Medicaid Health Plan</u>) and the Medicaid recipient ID number is (<u>provide Medicaid ID number</u>)."

Foster Parent/Relative Caregiver: "I am the foster parent of Johnny Smith. I am calling to schedule an appointment for Johnny to be assessed for services. I am concerned with his behavior as he is having a lot of trouble sleeping, calming down to go to sleep at night, and he isn't sleeping through the night. During the day, he is acting out toward other kids and adults and has started to punch/hit/kick when he gets frustrated. Johnny has McLaren health insurance (*Medicaid Health Plan*). He currently takes Concerta, 54 mg. in the morning."



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